

<b>Confirmed</b>
------------------

Minutes of the Great Yarmouth and Waveney Joint Health Scrutiny Committee Meeting held on 13 November 2015 at 10:30 am in the Conference Room, Riverside Campus, Lowestoft.

Present: Councillors Michael Ladd (Chairman, Suffolk County Council), Alison Cackett (Waveney District Council), Michael Chenery of Horsburgh (Norfolk County Council), Bert Poole (Suffolk County Council) and Shirley Weymouth (Great Yarmouth Borough Council).

Supporting officers present: Paul Banjo (Scrutiny Officer, Suffolk County Council), Rebekah Butcher (Democratic Services Officer, Suffolk County Council) and Maureen Orr (Democratic Support and Scrutiny Team Manager, Norfolk County Council).

## **12. Public Participation Session**

The Joint Committee heard from the following members of the public.

Mr Patrick Thompson, a member of the public, spoke in relation to Agenda Item 5: 'GP practice premises in Gorleston and Bradwell' consultation. Mr Thompson congratulated HealthEast who recommended using the Shrublands site to provide integrated healthcare. He raised some concerns over perceived 'tick-boxing' exercises for the consultation and highlighted in particular: why the summer months were chosen to hold the consultation, whether previous data was used from the former Waveney, Great Yarmouth and Norfolk Primary Care Trust's before designing these proposals, and had there been any proposals to recruit more GP's to the local area. Mr Thompson also sought assurance that the process for implementing the changes at Shrublands would be an open and transparent process for all stakeholders, including the public. In conclusion, Mr Thompson stated that he looked forward to working with others to provide what would be the best possible integrated health care in the area.

Councillor Sonia Barker, Leader of Waveney District Council and local county councillor for Pakefield Division, spoke in relation to Agenda Item 6: 'Shape of the System' consultation. Councillor Barker raised concerns about the accountability of those making decisions on behalf of the residents of Great Yarmouth and Waveney, in that they're not democratically elected. She felt the Chairman and the Clinical Commissioning Group (CCG) were dismissive of the objections of those who responded to the consultation. Councillor Barker stated, in her opinion, that the appraisal workshop held on 13 October 2015 was not representative and wished to know where the input was from social workers, nurses, physios, occupational therapists, mental health workers etc at that meeting. In conclusion, Councillor Barker urged the Committee to scrutinise the following: to whom was the Great Yarmouth and Waveney CCG accountable?

How democratic was its decision making? Was the decision based on evidence? How would a privately run local nursing and residential home be accountable to patients locally and the NHS? Who would pick up the cost if that local nursing and residential home closes? Now Southwold hospital was closed, how long would it take for a local 'hub' to be up and running? Would patients be placed in residential homes far from their family? Why was there a lack of projected information on the proposed hospital beds needed by 2025? What risk assessment had been undertaken to assess the proposals? How much money would be saved by enacting the proposed changes agreed by the Great Yarmouth and Waveney CCG?

Councillor Jane Murray, local district councillor for Oulton Ward, spoke in relation to Agenda Item 7: 'Information Bulletin: Briefing update on Marine Parade and Oulton Village practices'. Councillor Murray informed the Committee of the outrage felt by patients affected by the closure of the practise. Although Councillor Murray had been advised that support was given to the practise between inspections by the Care Quality Commission (CQC), Councillor Murray questioned how much support was given, and whether with more effective support and a sufficient number of clinical and clerical staff could have prevented the closure. She also highlighted the pressures mounting on other local surgeries that have had to cope with additional workloads stating that it was simply unacceptable. Councillor Murray stated that patients needed to know what would happen in the interim three months before being dispersed to other surgeries. In conclusion, Councillor Murray urged the CCG to hold an evening meeting for residents who either did not know about or were unable to attend previous meetings.

### **13. Apologies for Absence and Substitutions**

Apologies for absence were received from Councillor Michael Carttiss (substituted by Councillor Michael Chenery of Horsburgh) and Councillor Colin Aldred.

### **14. Declarations of Interest and Dispensations**

Councillor Michael Chenery of Horsburgh declared a non-pecuniary interest in Agenda Item 6: 'Shape of the System' consultation, by virtue of the fact he was involved in the North Norfolk and West Norfolk CCG's.

### **15. Minutes of the Previous Meeting**

The minutes of the meeting held on 22 July 2015 were confirmed as a correct record and signed by the Chairman.

*After hearing Agenda Item 4, the Chairman altered the order of the agenda; the minutes reflect the amended order.*

### **16. 'Shape of the System' consultation**

At Agenda Item 6, the Joint Committee received a suggested approach from the Scrutiny Officer (Suffolk County Council) to a report from the Great Yarmouth and Waveney Clinical Commissioning Group (GY&W CCG) about its decisions

following the public consultation on 'The Shape of the System – developing modern and sustainable health services in Great Yarmouth and Waveney'.

The Chairman welcomed the following witnesses to the meeting:

Andy Evans – Chief Executive, Great Yarmouth and Waveney CCG;

Rebecca Driver – Director of Engagement, Great Yarmouth and Waveney CCG;

Jonathan Williams – Chief Executive, East Coast Community Healthcare (ECCH).

The Chairman invited the witnesses to introduce the relevant sections of the report.

Andy Evans expressed the view that it was an extremely well researched consultation, fully in the public eye. If the CCG had all the money it needed it would still want to implement this model of care; this model is the best way forward. He stated that he is personally accountable to the Secretary of State, and that the CCG Governing Body had approved the changes unanimously.

Jonathan Williams stated that ECCH has worked closely with the CCG and that this sort of transformation is complex. ECCH is a social enterprise, is very staff focused, and had set up an HR taskforce right up front. He welcomed the CCG putting in place a collective Transformation Steering Group.

Members noted the assurance from the GY&W CCG that the new model of integrated care in the community would be tailored to each locality and would not be imposed before the new arrangements were in place.

Members also noted the clarification from the GY&W CCG that NHS treatment provided within a care home (i.e. 'beds with care', instead of in a hospital) would be free at the point of care, according to the patient's clinical need.

During debate, Members asked questions about services in the interim and whether they would be adequate to meet people's needs; staff morale at the Patrick Stead (Halesworth) and Southwold hospitals and what actions were being taken to improve it; staffing levels and subsequent recruitment issues; the number of patients transferred from Lowestoft to Halesworth; the consultation process; recruitment of GPs; and who was responsible for planning GP practises for new housing developments.

The Chairman expressed thanks to GY&W CCG and ECCH for their participation in the meeting.

**Recommendation:** The Joint Committee:

- a) Commended the GY&W CCG on the thoroughness of its consultation with the Joint Committee and members of the public.
- b) Recommended that the GY&W CCG continue to work with the local communities to provide tailored models of service provision.
- c) Recommended that the GY&W CCG continue to work closely with stakeholders on delivery of the new model of care.

- d) Reiterated the earlier recommendation that the GY&W CCG should give assurance that the new provision would be in place before closure of community hospital beds.

The Joint Committee confirmed that it did not intend to make a report to the Secretary of State under Section 23, paragraph 9 of the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

**Reason for recommendation:** Members were satisfied with the GY&W CCG's consultation process and that they had taken feedback responses on board. Members were concerned with staffing levels and recruitment at the Patrick Stead and Southwold community hospitals but accepted that East Coast Community Healthcare were doing everything they could to retain staff and raise morale.

The Joint Committee requested that GY&W CCG continue to engage with the Joint Committee, and noted that this item was on the Joint Committee's Forward Work Programme for July 2016.

With regard to staffing levels at the Community Hospitals, the Joint Committee noted that the Chief Executive of East Coast Community Healthcare would send a member of the Committee a copy of the recent job advertisement email.

With regard to Lowestoft bed capacity, the Joint Committee noted that the Chief Executive of GY&W CCG would inform a member of the committee as to how many patients went from Lowestoft to Halesworth in the past month.

**Alternative options:** There were none considered.

**Declarations of interest:** Councillor Michael Chenery of Horsburgh declared a non-pecuniary interest by virtue of the fact he was involved in the North Norfolk and West Norfolk CCG's.

**Dispensations:** There were none noted.

*Councillor Shirley Weymouth left the meeting at 11.52 am.*

## **17. 'GP practice premises in Gorleston and Bradwell' consultation**

At Agenda Item 5, the Joint Committee received a suggested approach from the Scrutiny Officer (Suffolk County Council) to a report from the Great Yarmouth and Waveney Clinical Commissioning Group (CCG) about its proposal to NHS England for their decision, following the public consultation on 'GP practice premises in Gorleston and Bradwell'.

The Chairman welcomed the following witnesses to the meeting:

Andy Evans, Chief Executive, Great Yarmouth and Waveney CCG; and

Rebecca Driver – Director of Engagement, Great Yarmouth and Waveney CCG.

The Chairman invited the witnesses to introduce the relevant sections of the report.

Members asked questions about the consultation; whether the premises would be accessible; whether existing staff would transfer to the new building; transport and parking; and prescription collection.

**Recommendation:** The Joint Committee:

- a) Commended the GY&W CCG on the thoroughness of its consultation, with the Joint Committee and with the general public.
- b) Recommended that the GY&W CCG continued to engage with all the stakeholders in implementing the decision.
- c) Will undertake its final consideration of this matter at its meeting on 22 January 2016, by which time NHS England would have made its decision in response to the CCG's recommendations.

Members noted that the GY&W CCG would engage further with NHS England and would refer to the Joint Committee's endorsement of the CCG's recommendation.

**Reason for recommendation:** Members were satisfied with the consultation process and felt it had been undertaken in a clear and transparent manner and endorsed the CCG Governing Body's recommendation.

**Alternative options:** There were none considered.

**Declarations of interest:** There were none declared.

**Dispensations:** There were none noted.

## **18. Information Bulletin**

The Committee noted the information bulletin at Agenda Item 7.

A further verbal update was received from Andy Evans (Chief Executive, GY&W CCG) about the ongoing process regarding former patients of the closed Oulton and Marine Parade Practices. There would be another update in the Information Bulletin on 22 January 2016.

## **19. Forward Work Programme**

At Agenda Item 8, the Joint Committee agreed its Forward Work Programme with the inclusion of an additional information update item on the Oulton Village and Marine Parade Practices, and on the Sands Lane (Woods Meadow) GP surgery planning proposal.

## **20. Urgent Business**

There was no urgent business.

*The meeting closed at 12.38 pm.*

Chairman